STATEMENT OF

FORM 1	ORGANIZATION					FEC MAJL CENTER		
1. NAME OF COMMITTEE (in	n full)	(Check is char	if name	Example: If typing, ty over the lines.	^{pe} 12FE4M	15		
UNITED S	TATE	S SENA	TE CAN	MPAIGN FU	ND FOR L	JTAH		
ADDRESS (number a	and street)	РО ВО	X 6813	37				
(Check if address is changed)		MIAMI			FL ₁	33168		
			c	CITY	STATE	ZIP CODE		
COMMITTEE'S E-MA	address			nail address) npaignFundi	· PACs@gm	nail,com, , , , , ,		
COMMITTEE'S WEE	B PAGE ADI	ORESS (URL)						
(Check if is change					1 1 1 1 1 1 1 1			
2. DATE 10) ^M ′ 4	°′ 2012	. *					
3. FEC IDENTIFIC	CATION N	JMBER	С					
4. IS THIS STATE	MENT X	NEW (N)	OR	AMENDED	(A)			
·		STAN	d to the best	of my knowledge and b	belief it is true, corre	ect and complete.		
Type or Print Name Signature of Treasur		Stanla	Cali	L-	Date 1	0" ′ 04° ′ ž012 `		
NOTE: Submission of		•		nay subject t he pe os on s IN SHOULD BE REPOR		to the penalties of 2 U.S.C. §437g 'S.		
Office Use Only				For further Inform Federal Election C Toll Free 800-424-	ommission 9530	FEC FORM 1 (Revised 02/2009)		